

OK
10/2/08
808

**APPLICATION FOR SERVICE
UNIFIED PERSONNEL POLICY COMMITTEE
OF SHELBY COUNTY GOVERNMENT**

(PLEASE TYPE OR PRINT LEGIBLY)

EMPLOYEE NAME Gary W. Kellum
DEPARTMENT Shelby County Sheriffs office
JOB LOCATION Sheriff's Substation / Garage
WORK PHONE 901-867-1445
JOBCLASSIFICATION Mechanic III
DATE EMPLOYED 1-20-1987
EMPLOYEE NUMBER 5#1690

Briefly state why you want to be a member of this committee and why you feel qualified to serve as an employee representative:

I want to be a member of this committee because I feel that the employees of Shelby County deserve a representative that understands how important Policy & benefits are to our future. I know that I could proudly represent the employees of this County, with 22 years of service, I know the heartbeat of these employees, and I would be an asset to this Committee and to all those I would represent. Thank You for your Consideration.

Gary Kellum

I, THE UNDERSIGNED, CERTIFY THAT I MEET THE BASIC REQUIREMENTS FOR SERVICES AS LISTED BELOW:

1. I am a full-time County employee with five (5) or more years of continuous County employment
2. I am not employed as a manager, assistant manager, administrator, deputy administrator, division director, administrative assistant or an elected official.

Gary Kellum
Employee's Signature

10-22-08
Date Signed

APPLICATION FOR SERVICE
UNIFIED PERSONNEL POLICY COMMITTEE
OF SHELBY COUNTY GOVERNMENT

OK
502
10/24/08

(PLEASE TYPE OR PRINT LEGIBLY)

EMPLOYEE NAME Lorraine Washington
DEPARTMENT Corrections - Training
JOB LOCATION Training Academy - 993 Dovecrest
WORK PHONE 385-5134
JOBCLASSIFICATION Counselor A
DATE EMPLOYED 4/15/91
EMPLOYEE NUMBER 7267

Briefly state why you want to be a member of this committee and why you feel qualified to serve as an employee representative:

Having worked for Division of Corrections for over 17 years, I feel that any discussion and decision about County Personnel Policy will not only effect me now, but it can impact my future. Many times the Division's staff is not made aware of any policy changes until after the changes are implemented, and there is usually no one on the committee to represent the non-management staff of the Division of Corrections. I would like to be that voice, that representative, and I would put forth the greatest effort to make sure changes and suggestions reflect the concerns of all Shelby County non-management staff, to include the Division of Corrections.

I, THE UNDERSIGNED, CERTIFY THAT I MEET THE BASIC REQUIREMENTS FOR SERVICES AS LISTED BELOW:

1. I am a full-time County employee with five (5) or more years of continuous County employment
2. I am not employed as a manager, assistant manager, administrator, deputy administrator, division director, administrative assistant or an elected official.

Lorraine Washington
Employee's Signature

10/20/08
Date Signed